PTO/SB/05 (08-03)

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UTILITY PATENT APPLICATION

	Attorney Docket No.		480062004300						
ı	First Ir	nventor	BUTTS et al.						
	Title CATHETER CONNECTOR								
	Express Mail Label No.		ER 038495442 US						

TRANSMITTAL	1100 CATHETER CONNECTOR						
(Only for new nonprovisional applications under 37 CFR 1.53(b))	Expres	ess Mail Label No. ER 038495442 US					
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents. ADDRESS TO: MS Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450							
	8 1 3 1	Alexandra, VA 22313-1450 7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. Paper c. Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS 9. Assignment Papers (cover sheet & document(s)) 10. 37 CFR 3.73(b) Statement (when there is an assignee) Attomey 11. English Translation Document (if applicable) 12. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Statement (IDS)/PTO-1449 Citations 13. Preliminary Amendment 14. X Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. X Other: Application Cover Page (1 page)					
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in-part (CIP) of prior application No.: Prior application information: Examiner Art Unit: For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.							
19. COF	RESPO	ONDENCE ADDRESS					
X Customer Number: 25224		OR Correspondence address below					
Name .							
Address .							
City State		Zip Code					
Country Telephone		Fax					
Name (Print/Type) Todd W. Wight Registration No. (Attorney/Agent) 45,218							
Signature Date March 18, 2004							

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. ER 038495442 US, in an envelope addressed to: MS Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: March 18, 2004



PTO/SB/17 (10-03)
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EEE TO A NOMITTAL			Complete if Known					
FEE TRANSMITTAL		Application Number				Not Yet Assigned		
for FY 2004	Filing Date				Concurrently Herewith			
		First Named Inventor			ntor	BUTTS et al.		
Effective 10/01/2003, Patent fees are subject to annual revision.		Examiner Name				Not Yet Assigned		
Applicant claims small entity status. See 37 CFR 1.27		Art Unit				N/A		
TOTAL AMOUNT OF PAYMENT (\$) 1,392		Attom	ey Do	ket No	o	4800620	04300	
METHOD OF PAYMENT (check all that apply)				FEE	CALCU	LATION (co	ontinued)	
Check Credit Money Other None X Deposit Account:	3. ADDITIONAL FEES Large Entity Small Entity							
Deposit Account 03-1952 Number	Fee Code	Fee (\$)	Fee Code	Fee (\$)	-	Fee Des	cription	5 B-id
Deposit	1051	130	2051	(3)	Cumharan	loto filing fo	o or ooth	Fee Paid
Account Morrison & Foerster LLP						- late filing fe	onal filing fee or cover	
The Director is authorized to: (check all that apply)	1052	50	2052	25	sheet.	iato provisi	ond many lee or cover	
X Charge fee(s) indicated below X Credit any overpayments	1053	130	1053	130	Non-Englis	sh specificatio	ก	
X Charge any additional fee(s) or any underpayment of fee(s)	1812	2,520	1812	2,520	For filing a	request for ex	parte reexamination	
Charge fee(s) indicated below, except for the filing fee	1804	920*	1804	920*	Examiner	action	of SIR prior to	
to the above-identified deposit account.	1805	1,840*	1805	1,840*	Requesting Examiner	g publication (of SIR after	
FEE CALCULATION	1251	110	2251	55		for reply withi	n first month	
1. BASIC FILING FEE	1252	420	2252				n second month	
Large Entity Small Entity Fee Fee Fee Fee Fee Description Fee Paid	1253	950	2253	475	Extension	for reply withi	n third month	
Code (\$) Code (\$)	1254	1,480	2254	740	Extension	for reply withi	n fourth month	
1001 770 2001 385 Utility filing fee 770.00	1255	2,010	2255			for reply withi	n fifth month	
1002 340 2002 170 Design filing fee 1003 530 2003 265 Plant filing fee	1401 1402	330 330	2401 2402	165 165	Notice of A	• •	of an appeal	
1004 770 2004 385 Reissue filing fee	1403	290	2403	145		ef in support or or oral hearing		
1005 160 2005 80 Provisional filing fee	1451	1,510	1451		•	_	olic use proceeding	
SUBTOTAL (1) (\$) 770.00	1452	110	2452	55	Petition to	revive – unav	oidable	
000101A2(1) (0) //0.00	1453	1,330	2453	665	Petition to	revive - unint	entional	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE Extra Fee from	1501	1,330	2501	665	Utility issue	e fee (or reiss	ue)	
Claims below Fee Paid	1502	480	2502	240	Design iss	ue fee		
Total Claims 45 -20** = 25 x 18 = 450	1503	640	2503	320	Plant Issue			
Claims 5 -3" = 2 X 86 = 172	1460	130	1460	130		the Commis		
Multiple Dependent	1807	50	1807	50	1		7 CFR 1.17(q)	
Large Entity Small Entity Fee	1806	180	1806	180			on Disclosure Stmt	
Code (\$) Code (\$) Fee Description	8021	40	8021	40	property (ti	mes number	ssignment per of properties)	
1202 18 2202 9 Claims in excess of 20	1809	770	2809	385	Filing a sul (37 CFR 1		r final rejection	
1201 86 2201 43 Independent claims in excess of 3 1203 290 2203 145 Multiple dependent claim, if not paid	1810	770	2810	385	For each a	dditional inve		
1204 86 2204 43 ** Reissue independent claims	1801	770	2801	385		(37CFR 1.129 or Continued E	P(b)) Examination (RCE)	
over original patent 1205 18 2205 9 ** Reissue claims in excess of 20	1802	900	1802	900	Request to	r expedited e		
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	Other	of a design application Other fee (specify)						
SUBTOTAL (2) (\$) 622.00							0.00	
**or number previously paid, if greater, For Reissues, see above								
SUBMITTED BY						(Complete	(if applicable))	
Name (Print/Type) Todd W. Wight	Regist (Attorne	ration No ey/Agent)	45	,218		Telephone	(949) 251-7189	
Signature Date March 18, 2004								

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